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APPLICANTS

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** CONTINUING DATA *****
 This appln claims benefit of 60/396,943 07/17/2002 2

** FOREIGN APPLICATIONS ***** None 2

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 10/09/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature Initials	STATE OR COUNTRY CT	SHEETS DRAWING 1	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
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ADDRESS

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TITLE

Suture retainer package

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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